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PTO/SB/97 (08-00)

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Application Number: 10/811,287

Filing Date: 3/25/2004

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1. Fee Transmittal
2. Response to Office Action Dated 10/05/2005
3. Information Disclosure Statement
4. PTO Form 1449

Total pages including cover sheet: 21

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OCT 20 2005

PTO/SB/17 (12-04)

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Effective on 12/08/2004.

Fee pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818).

**FEE TRANSMITTAL  
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 580.00)

**Complete If Known**

Application Number	10/811,287
Filing Date	3/25/2004
First Named Inventor	Li Lu
Examiner Name	JEFFREY DONELS
Art Unit	2837
Attorney Docket No.	MS1 1904US

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity	
Fee (\$)	Fee (\$)

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

**Total Claims**

<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 20 or HP =	x 50	= _____

HP = highest number of total claims paid for, if greater than 20

**Multiple Dependent Claims**

<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____	_____

<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
5 - 3 or HP =	2 x 200	= 400.00

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____	100 =	/ 50 = (round up to a whole number)	x _____	= _____

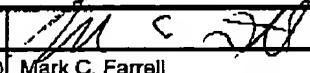
**Fee Paid (\$)****4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement

180.00

**SUBMITTED BY**

Signature		Registration No. 45988 (Attorney/Agent)	Telephone (509) 324-9256
Name (Print/Type)	Mark C. Farrell		Date 10-20-05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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